

FILED

MAY 12 2022

PETER A. MOORE, JR., CLERK  
US DISTRICT COURT, EDNC  
BY \_\_\_\_\_  
DEP CLK

United States District Court  
Eastern District of North Carolina  
Western Division

Case No. 5:22-CT-3153-D

(To be filled out by Clerk's Office only)

Cassandra Pruitt

Inmate Number 143219D

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Sargeant Deangello

**COMPLAINT**

(Pro Se Prisoner)

Jury Demand?

Yes

No

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Section IV. Do not include addresses here.)

**NOTICE**

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

## I. COMPLAINT

Indicate below the federal legal basis for your claim, if known. This form is designed primarily for pro se prisoners challenging the constitutionality of their conditions of confinement, claims which are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

42 U.S.C. § 1983 (state, county, or municipal defendants)

Action under *Bivens v. Six Unknown Federal Narcotics Agents*, 403 U.S. 388 (1971) (federal defendants)

Action under Federal Tort Claims Act (United States is the proper defendant; must have presented claim in writing to the appropriate Federal agency and received a notice of final denial of the claim pursuant to 28 U.S.C. § 2401(b))

## II. PLAINTIFF INFORMATION

Cassandra Pruitt

Name

143219D

Prisoner ID #

Anson Correctional

Place of Detention

P.O. Box 280

Institutional Address

Polkton

City

N.C.

State

28135

Zip Code

## III. PRISONER STATUS

Indicate whether you are a prisoner or other confined person as follows:

Pretrial detainee    State    Federal

Civilly committed detainee

Immigration detainee

Convicted and sentenced state prisoner

Convicted and sentenced federal prisoner

#### IV. DEFENDANT(S) INFORMATION

Please list the following information for each defendant. If the correct information is not provided, it could result in the delay or prevention of service. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant 1:

Sergeant Deangelis

Name

Sergeant

Current Job Title

1100 Clarks Rd

Current Work Address

New Bern

City

N.C

State

28560

Zip Code

Capacity in which being sued:  Individual  Official  Both

Defendant 2:

Name

Current Job Title

Current Work Address

City

State

Zip Code

Capacity in which being sued:  Individual  Official  Both

**Defendant(s) Continued**

Defendant 3: \_\_\_\_\_

Name \_\_\_\_\_

Current Job Title \_\_\_\_\_

Current Work Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Capacity in which being sued:  Individual  Official  Both

Defendant 4: \_\_\_\_\_

Name \_\_\_\_\_

Current Job Title \_\_\_\_\_

Current Work Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Capacity in which being sued:  Individual  Official  Both

V. STATEMENT OF CLAIM

Place(s) of occurrence:

Craven County Jail

Date(s) of occurrence:

06/12/2020, 06/13/2020

State which of your federal constitutional or federal statutory rights have been violated:

~~Excessive Force~~

cruel and unusual

~~punishment~~

*State here briefly the FACTS that support your case. Describe how each defendant was personally involved in the alleged wrongful actions, state whether you were physically injured as a result of those actions, and if so, state your injury and what medical attention was provided to you.*

FACTS:

Who did what to you?

I was put in the restraint chair and in the process Deangelo wrapped her hands around my throat and choked me twice. I was in handcuffs the second time. We later that night got into a physical altercation and I was tazed (I stopped fighting and she grabbed me by my hair and slammed my head). I had to get 4 staples in my head. As they was taking me to booking my hands was cuffed behind my back. She was taunting me I kicked at the side. She then punched me in my face (talking about it hurt didn't it). Everything is on camera. Then it took over a hour for me to get medical attention. I was sent to the hospital. I was in isolation when it began. It started that morning and ended at night.

What  
happened  
to you?

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When did it  
happen to  
you?

It started in the morning and ended at night.

Where did it  
happen to  
you?

IT started in my cell and ended in the dayroom.

What was  
your  
injury?

I had ~~been~~ to have 4 staples put in  
the back of my head where I got busted open.  
And bruised where handcuff's way to tight.

## VI. ADMINISTRATIVE PROCEDURES

*WARNING: Prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions. 42 U.S.C. § 1997e(a). Your case may be dismissed if you have not exhausted your administrative remedies.*

Have you filed a grievance concerning the facts relating to this complaint?  Yes  No

If no, explain why not:

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Is the grievance process completed?  Yes  No

If no, explain why not:

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## VII. RELIEF

*State briefly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.*

I'd like to be compensated for suffering and mental it put me in.

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### VIII. PRISONER'S LITIGATION HISTORY

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal *in forma pauperis* in federal court if that prisoner has "on three or more occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. §1915(g).

Have you brought any other lawsuits in state or federal court while a prisoner?

Yes  No

If yes, how many? \_\_\_\_\_

Number each different lawsuit below and include the following:

- Name of case (including defendants' names), court, and docket number
- Nature of claim made
- How did it end? (For example, if it was dismissed, appealed, or is still pending, explain below.)

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#### IX. PLAINTIFF'S DECLARATION AND WARNING

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

*Each Plaintiff must sign and date the complaint and provide prison identification number and prison address.*

05/05/2022

Dated

Cassandra Pruitt

Plaintiff's Signature

Cassandra Pruitt

Printed Name

1432190

Prison Identification #

P.O. BOX 280

Prison Address

POKTON

City

N.C. 28135

State Zip Code